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Docket No. 971-155

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment; Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 2, 2004


Stephanie Berlepsch

Patent

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Technology Center 2100

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Applicant: Simpson et al.

Paper No.:

Serial No.: 09/943,786

Group Art Unit: 2172

Filed: August 31, 2001

Examiner: Anh Ly

For: METHOD AND APPARATUS FOR PRESENTING, SEARCHING, AND VIEWING DIRECTORIES

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

additional fee is required.
 also attached: Transmittal of Formal Drawings; Ten Sheets of Formal Drawings; and Return Receipt Postcard

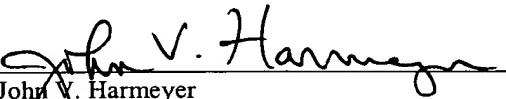
The fee has been calculated as shown below:

| | NO. OF CLAIMS | HIGHEST PREVIOUS PAID FOR | EXTRA CLAIMS | RATE | FEE |
|--|---------------|---------------------------|--------------|----------|----------|
| Total Claims | 20 | 20 | 0 | x \$18 = | \$ |
| Independent Claims | 5 | 5 | 0 | x \$84 = | \$ |
| If multiple claims newly presented, add \$270.00 | | | | | ----- |
| Month Extension Fee | | | | | \$ |
| Information Disclosure Statement | | | | | \$000.00 |
| TOTAL FEE DUE | | | | | \$ |

A check in the amount of \$ is enclosed.
 Please charge my Deposit Account No. 04-1133 in the amount of \$.
 Please charge the amount of \$ ____ to our Visa credit card. Form PTO-2038 is enclosed.

[x] The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment, to Deposit Account No. 04-1133, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

By: 

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Date: July 2, 2004

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